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PTO/SB/30 (04-05)
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## Request 09/699,163 Application Number For October 27, 2000 Filing Date Continued Examination (RCE) Transmittal Michael J. FREEMAN First Named Inventor Address to: 2611 Art Unit MS RCE Commissioner for Patents P.O. Box 1450 K. O. T. Bui **Examiner Name** Alexandria, VA 22313-1450

Attorney Docket Number

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on
ii. Other
b. x Enclosed
i. X Amendment/Reply iii. Information Disclosure Statement (IDS)
ii. Affidavit(s)/Declaration(s) iv. Other
2. Miscellaneous
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
b. Other
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 03-1952   Lhave enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
i. X RCE fee required under 37 CFR 1.17(e)
ii. Extension of time fee (37 CFR 1.136 and 1.17)
iii. Other
b. Check in the amount of \$ enclosed
c. Payment by credit card (Form PTO-2938 enclosed)
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED
Signature Date October 19, 2005
Name (Print/Type) Jonathan Bockman Registration No. 45,640

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Effective on 12/08		Complete if Known		
Fees pursuant to the Consolidated Approp		Application Number	09/699,163	
		Filing Date	October 27, 2000	
		First Named Inventor	Michael J. FREEMAN	
For FY 20	JU5	Examiner Name	K. O. T. Bui	
Applicant claims small entity stat	us. See 37 CFR 1.27	Art Unit	2611	
TOTAL AMOUNT OF PAYMENT	(\$) 790.00	Attorney Docket No.	559442000113	
METHOD OF PAYMENT (check	all that apply)			
Check Credit Card  X Deposit Account Deposit Account For the above-identified depo X Charge fee(s) indicated X Charge any additional fee(s) under 37 CFR 1	osit account, the Director is d below fee(s) or underpayment of	s hereby authorized to: (c	Morrison & Foerster LLP heck all that apply) indicated below, except for the filing fee	
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND E				
FI			MINATION FEES	
Application Type   East	Small Entity	Small Entity	Small Entity  \$ Fac (\$) Fac Raid (\$)	

1. BASIC FILING, SEARCH	, AND EXA	MINATION FE	ES					
	FILI	NG FEES	SEAF	RCH FEES	EXAMIN	IATION FEES		
A It At T	E (#)	Small Entity	F (A)	Small Entity	F (¢)	Small Entity	F	D=:4 (¢)
Application Type	<u>Fee (\$)</u>	Fee (\$)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	rees	<u> Paid (\$)</u>
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (includi	ng Reissue	s)					50	25

Fee I	Description				Fee (\$)	Fee (\$)
Each	claim over 20	(including Reiss	ues)		50	25
Each	independent of	claim over 3 (incli	ıding Reissu	es)	200	100
Mult	iple dependen	t claims			360	180
Tot	al Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	

Total Claims	Extra Claims	ree (\$)	ree Palu (\$)	Multiple Dep	endent Ciaims	
2	0 = x	·	=	Fee (\$)	Fee Paid (\$)	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	7	Number of each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)
100	0 =	/50	(round up to a whole number) x		= _	
I. OTHER FEE(S)						Fees Paid (\$)
Non-English Spec	ification, \$130 f	ee (no s	mall entity discount)			
			equest for continued examination (RCE) (s	see 37		790.00

SUBMITTED BY					
Signature	Las	Registration No. (Attorney/Agent)	45,640	Telephone	(703) 760-7769
Name (Print/Type)	Jonathan Bockman	***		Date	October 19, 2005